	UVMHN/DMH	I JOINT PROPOSAL FO	R EXPENDITURE OF	\$18 MILLION ON MENTAL HEALTH SERVICE NEEDS IN VERMONT 5/29/23
Time Frame	Action Area (See Graphic Below)	Proposed Investment	Estimated Annual Cost (in Millions)	Description of Program and Basis for Cost Estimate
	AA4	Primary care mental health integration (PCMHI)	\$0.64	Establish new capacity in primary care extension program for rapid access to care and develop core competencies and training for existing primary care staff to demonstrate true integration between primary care and mental health care; 2.0 FTE
	AA1 and AA5	Develop and implement protocols for suicide risk assessment and prevention	\$0.32	Engage in policy development and implementation of best practice for suicide prevention including risk assessment and safe pathways to care - with specific focus on service members, veterans and their families in alignment with the Governor's Challenge for suicide prevention. Likely will require IT work.
	AA5	Establish Esketamine Program at UVMMC	\$0.55	Establish new capacity in esketamine service at UVMMC. Budgeted for a director of neurostimulation, 1 full time nurse, and equipment for infusion. Estimated first year annual volume of 1621 visits with advancement to volumes of 5512 by year 3, which will require increases in nursing to 3 FTE.
Year 1 (HFY 2024)	AA5	Establish Mental Health Urgent Care Clinic	\$2.85	The Mental Health Urgent Care Clinic proposed for Chittenden County leverages a collaboration between Community Health Centers, Howard Center and UVM Medical Center. The project will be led by Howard Center, and will focus on building an alternative to the Emergency Department for individuals in need of mental health care, specifically the approximately two thirds of individuals seeking mental health treatment in the ED who do not need inpatient-level care. The Mental Health Urgent Care Clinic would be a seven day a week, 12 hour-per-day program where individuals are assessed in a timely manner, with supportive follow-up services and access to immediate peer support and other supportive counseling. Year 1 Operating – \$3,646,812 - \$800,000 DMH Grant = \$2,466,044 Year 1 One-time Fit-up - \$380,768 The majority of expense for the Clinic will be for clinical staffing, with some expenses being provided in-kind by the partners. Additionally, years one and two are offset by a grant awarded by the Vermont Department of Mental Health for \$800,000 per year.
	AA5	Establish Transcranial Magnetic Stimulation (TMS) Program at UVMMC	\$0.09	Director of Neurostimulation costs rolled into esketamine above. This line includes purchase of the MagVenture Depression Therapy System with Express TMS based on MagPro R30 Magnetic Stimulator for use in TMS as an alternative to ECT for patients with severe depression and/or suicidality.
	AA5	Reconfigure psychiatric unit at Central Vermont Medical Center to increase bed use and improve patient experience	\$4.50	CVMC's shared inpatient psychiatry rooms (rooms with two patient beds) reduce their capacity to care for psychiatric patients needing hospitalization. The second bed in these rooms is frequently unavailable for use due to a wide assortment of reasons, from medical concerns and the need for isolation to those with a history of trauma who are unable to share a room. This project will decrease the current boarding of psychiatric patients in CVMC ED by converting six beds from shared rooms to private rooms. This will not change the overall number of beds, but will bring the private bed count to 8 from the current 2 on the unit. The conversion of the double occupancy rooms to single occupancy will provide patients with more privacy, confidentiality and access to a more calm and quiet environment for sleep and self-care. The new single patient rooms would also include in-room bathrooms with showers to improve the inpatient experience.
		Year 1 Sub-Total	\$8.95	
Time Frame	Action Area (See Graphic Below)	Proposed Investment	Estimated annual cost	Description of Program and Basis for Cost Estimate
rranic	AA5	Mental Health Urgent Care Program	\$2.90	See above; years 2 and beyond do not include fit-up costs, but include some wage inflation.
Year 2 (HFY 2025)	AA5	Bed need and feasibility study of expansion of UVMMC inpatient psychiatric capacity for adults and children	\$1.00	Study would include determination of the need for additional capacity given statewide supply, programmatic specifications, and costing. Study would address plans for: a) Psychiatric evaluation, service, medication management and consultation b) Daily therapeutic care and intervention following best practices for acute stabilization c) Use of Six Core Strategies for reduction of seclusion and restraint d) Trauma-responsive setting and treatment approaches e) Family involved in treatment as clinically indicated f) Discharge planning in collaboration with family, relevant community and State partners g) Provide admission and discharge capacity 24 hours a day, 7 days a week.

Year 2 (HFY 2025)	AA5	Eating Disorder and Transgender Care Clinics for Youth Pilot program: transport	\$0.50	Add a physician, other providers (dieticians, social workers, psychologists) and support staff for youth with eating disorders or transgender care needs to meet referral and access demands.			
	AA5	patients to Brattleboro Retreat from 5:00-11:00 PM	\$0.25	Expand ambulance hours beyond 5:00 PM for transfers to the Retreat. Pilot program will quantify the need for and use of this service.			
Year 2 Sub-Total \$4.65							
Time Action Area (See Estimated annual cost							
	Graphic Below)	Proposed Investment	(in Millions)	Description of Program and Basis for Cost Estimate			
	AA5	Mental Health Urgent Care Program	\$3.90	See above; years 2 and beyond do not include fit-up costs, but include some wage inflation.			
Year 3 (HFY 2026)	AA5		\$3.90	See above; years 2 and beyond do not include fit-up costs, but include some wage inflation. Add a physician, other providers (dieticians, social workers, psychologists) and support staff for youth with eating disorders or transgender care needs to meet referral and access demands.			
(HFY 2026)	AA5	Care Program Eating Disorder and Transgender Care Clinics for Youth Year 3 Sub-total	\$0.50 \$4.40	Add a physician, other providers (dieticians, social workers, psychologists) and support staff for			

\$18.00

THREE YEAR TOTAL

DEPARTMENT OF MENTAL Vision 2030 (vermont.gov) **HEALTH** Action Area 7: Action Area 1: Ensuring Service Delivery is Person-led Promoting Health and Wellness Mission: Offering peer services at all levels of care To promote and improve the mental health of Vermonters. Action Area 3: Eliminating Stigma and Discrimination Expanding Access to nmunity-based Care VISION Vision: 2030 Action Area 5: Enhancing Mental Health will be a cornerstone of health in 9 Vermont. and Discharge Planning Services to Support Vermonters People will live in caring communities with Action Area 8: Committing to Workforce compassion for and a determination to respond in Crisis effectively and respectfully to the mental health Development and Payment needs of all citizens. Vermonters will have Action Area 2: Influencing Social Contributors access to effective prevention, early intervention, and mental health treatment and supports as needed to live, work, learn, and participate fully in their communities.